Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District Of Illinois	_
Case number (If known):	Chapter you are filing under: ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify	Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1. Your full name				
Write the name that is on you government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting	Jose First name Manuel Middle name Esparza Last name	Mayra First name Middle name Esparza Last name		
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)		
2. All other names you have used in the last 8 years	First name	First name		
Include your married or maiden names.	Middle name	Middle name		
	Last name	Last name First name		
	First name			
	Middle name	Middle name		
	Last name	Last name		
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 4 5 6 1 OR 9 xx - xx	xxx - xx - <u>8</u> <u>2</u> <u>0</u> <u>2</u> OR 9 xx - xx		

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Debtor 1

Jose Manuel Esparza
First Name Middle Name

t Name M	liddle Name	Last Name

Case number (if known)_____

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in		☑ I have not used any business names or EINs.	☑ I have not used any business names or EINs.		
	the last 8 years	Business name	Business name		
	Include trade names and				
	doing business as names	Business name	Business name		
		EIN	EIN — — — — — — — —		
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		142 Lakeshore Drive			
		Number Street	Number Street		
		Oswego IL 60543			
		City State ZIP Code	City State ZIP Code		
		KENDALL			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1

Jose Manuel Esparza

Last Name

Case number (if known)_____

Pa	Tell the Court Abou	t Your B	ankrup	otcy Case			
7.	The chapter of the Bankruptcy Code you		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.				
	are choosing to file under	☑ Chapter 7					
	under	☐ Chap	ter 11				
		☐ Chap	ter 12				
		☐ Chap	ter 13				
8.	How you will pay the fee	local your subn	will pay the entire fee when I file my petition. Please check with the clerk's office in your ocal court for more details about how you may pay. Typically, if you are paying the fee ourself, you may pay with cash, cashier's check, or money order. If your attorney is ubmitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.				
				ay the fee in installments. If you			
		Appl	ication	for Individuals to Pay Your Filing	Fee in Installm	ents (Official Form 103A).	
		□ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.					
9.	Have you filed for	⊠ No					
	bankruptcy within the last 8 years?	☐ Yes.	District	When	MM / DD / YYYY	Case number	
			District	When		Case number	
						Case number	
			District	When	MM / DD / YYYY	Case number	
10	Are any bankruptcy	ĭ No					
	cases pending or being filed by a spouse who is	_	Debtor			Relationship to you	
	not filing this case with you, or by a business partner, or by an affiliate?			When		Case number, if known	
			Debtor			Relationship to you	
			District	When	MM / DD / YYYY	Case number, if known	
11.	Do you rent your residence?	No. Yes.	Has yo resider	line 12. Dur landlord obtained an eviction judg nce? Dur to line 12.	ment against you	and do you want to stay in your	
			_		Eviction Judament	t Against You (Form 101A) and file it with	
			this bankruptcy petition.				

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Debtor 1 Jose Manuel Esparza Case number (if known)____

Are you a sole proprietor	ĭ No. (Go to Part 4.					
of any full- or part-time business?	☐ Yes.	Name and location of bu	siness				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any Number Street					
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		City			ate	ZIP Code	
		·					
		Check the appropriate be	•				
		Health Care Busines	`	,	,,		
		☐ Single Asset Real Es	•	_	01(51B))		
		Stockbroker (as defin		• , ,,			
		Commodity Broker (a	as defined in 11	U.S.C. § 101(6))			
		■ None of the above					
business debtor, see	☐ No.	I am filing under Chapter the Bankruptcy Code.				-	
11 U.S.C. § 101(51D). art 4: Report if You Own		I am filing under Chapter Bankruptcy Code. Any Hazardous Prop				-	
art 4: Report if You Own . Do you own or have any		Bankruptcy Code.				-	
art 4: Report if You Own Do you own or have any property that poses or is alleged to pose a threat of imminent and	or Have	Bankruptcy Code.				-	
art 4: Report if You Own Do you own or have any property that poses or is alleged to pose a threat	or Have	Bankruptcy Code. Any Hazardous Prop	erty or Any F	roperty That N	Needs I	mmediate A	Attention
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	or Have	Any Hazardous Prop What is the hazard?	erty or Any F	roperty That N	Needs I	mmediate A	Attention
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	or Have	Any Hazardous Prop What is the hazard?	erty or Any F	roperty That N	Needs I	mmediate A	Attention

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Debtor 1 Jose Manuel Esparza

First Name Middle Name

Last Name

Case number (if known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	bout
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

Jose Manuel Esparza
First Name Middle Name

Last Name

Pa	rt 6: Answer These Ques	tions for Reporting Purpo	oses			
16.	What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. ☑ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain 				
		No. Go to line 16c. Yes. Go to line 17.	investment or through the operation of the			
		16c. State the type of debts yo	ou owe that are not consumer debts or bu	usiness debts.		
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is		administrative expens	Chapter 7. Go to line 18. apter 7. Do you estimate that after any exesses are paid that funds will be available to	empt property is excluded and odistribute to unsecured creditors?		
Santana amina a	excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☑ No □ Yes				
18.	How many creditors do you estimate that you owe?	▲ 1-49➡ 50-99➡ 100-199➡ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19.	How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Pa	art 7: Sign Below			at the information provided in true and		
Fo	or you	correct. If I have chosen to file under (, and I declare under penalty of perjury the Chapter 7, I am aware that I may proceed e. I understand the relief available under	d, if eligible, under Chapter 7, 11,12, or 13		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I understand making a false s	result in fines up to \$250,000, or imprisoni	ng money or property by fraud in connection		
		Signature of Debtor Executed on MM / DD) 16 Execu	ted on OYAO AOLO		

Case 16-13561

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Debtor 1

Jose Manuel Esparza First Name

Middle Name

Last Name

Bar number

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Date Atterney for Debtor Stephanie K. Low Printed name Serrano, Low & Hanson Firm name 431 Williamsburg Ave Number Street Geneva 60134 City State ZIP Code Contact phone (630) 844-8781 Email address

State

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Debtor 1

Jose Manuel Esparza

ame Middle Name Last Name

Case number (if known)_____

Pai	rt 6: Answer These Ques	stions for Reporting Purpos	ses			
	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
	you nave?	No. Go to line 16b.X Yes. Go to line 17.				
			rily business debts? Business of avestment or through the operation of	debts are debts that you incurred to obtain of the business or investment.		
		No. Go to line 16c. Yes. Go to line 17.				
		16c. State the type of debts you	u owe that are not consumer debts o	or business debts.		
	Are you filing under Chapter 7?	☐ No. I am not filing under Cl	hapter 7. Go to line 18.			
	Oo you estimate that after any exempt property is	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	excluded and	× No				
	administrative expenses are paid that funds will be	☐ Yes				
	available for distribution to unsecured creditors?					
	How many creditors do	▲ 1-49	1,000-5,000	25,001-50,000		
	you estimate that you owe?	5 0-99	5,001-10,000	5 0,001-100,000		
(☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000		
19.	How much do you	\$0-\$50,000	□ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion		
	estimate your assets to	\$50,001-\$100,000	\$10,000,001-\$50 million	= \$1,000,000,001-\$10 billion		
	be worth?	■ \$100,001-\$500,000	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion		
		□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	More than \$50 billion		
	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion		
	estimate your liabilities to be?	\$50,001-\$100,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion		
	10 00 1	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 millior	\$10,000,000,001-\$50 billion More than \$50 billion		
Pai	t 7: Sign Below	— \$500,001 \$1 mmon	4 \$100,000,001 \$500 Hillion	Word than \$50 billion		
For	you	I have examined this petition, a correct.	nd I declare under penalty of perjur	y that the information provided is true and		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
			ult in fines up to \$250,000, or impris	aining money or property by fraud in connection conment for up to 20 years, or both.		
		s/Jose Manuel Esparza	x _{s/\}	Mayra Esparza		
		Signature of Debtor 1		nature of Debtor 2		
		Executed on 04/20/2016 MM / DD /		ecuted on 04/20/2016 MM / DD / YYYY		

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Debtor 1	Jose Manuel Esparza			Case number (if known)
	First Name	Middle Name	Last Name	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

s//s/Stephanie K. Low	Date	04/20/2016
Signature of Attorney for Debtor		MM / DD /YYYY
Stephanie K. Low Printed name		
Serrano, Low & Hanson Firm name		
431 Williamsburg Ave Number Street		
Geneva	IL	60134
City	State	ZIP Code
Contact phone (630) 844-8781	Email address	·

Fill in this information to identify your case and this filing:						
Debtor 1	Jose First Name Mayra	Manuel Middle Name	Esparza Last Name Esparza			
(Spouse, if filing)		Middle Name	Last Name			
United States Bankruptcy Court for the: Northern District of Illinois						
Case number						

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

	e is the property? akeshore Drive	What is the property? Check all that apply. ☑ Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Śchedule D</i>
	dress, if available, or other description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property? \$ 143,000.00	, , ,
Oswego	State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one. Debtor 1 only	Fee Simple Owner	rship
County		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this ite	Check if this is co	mmunity property
		property identification number:		
1.2.	ave more than one, list here:	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule D</i>
1.2.	ave more than one, list here:	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home	Do not deduct secured cla	d claims on Schedule Date of the secured by Property
1.2.		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	d claims on Schedule E ns Secured by Property Current value of t portion you own? \$
1.2Street ad	dress, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule Lens Secured by Property Current value of t portion you own? \$

ase 16 3561 Jose Manuel

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Desc Main

What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ■ Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? ■ Manufactured or mobile home ■ Land ■ Investment property Describe the nature of your ownership City State ZIP Code Timeshare interest (such as fee simple, tenancy by Other _ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property ☐ Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages \$143,000.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No X Yes Who has an interest in the property? Check one. Chrysler Make: Do not deduct secured claims or exemptions. Put 3 1 the amount of any secured claims on Schedule D: Debtor 1 only Model: See Creditors Who Have Claims Secured by Property. Debtor 2 only 2002 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? 175000 Approximate mileage: ☐ At least one of the debtors and another Other information: \$ See Attachment 1 \$ See Attachment 1 ☐ Check if this is community property (see Purchased from a friend instructions) 03/2016 \$3,100.00 If you own or have more than one, describe here: Who has an interest in the property? Check one. Dodge 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Ram Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: \$ See Attachment 2 \$ See Attachment 2 ☐ Check if this is community property (see instructions)

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3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Clain	
	Year:	Debtor 2 only	Current value of the	Current value of the
		Debtor 1 and Debtor 2 only	Current value of the entire property?	portion you own?
	Approximate mileage:	At least one of the debtors and another	,	,
	Other information:		\$	\$
		☐ Check if this is community property (see instructions)	Ψ	Ψ
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Clain	
	Year:	Debtor 2 only		
		☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another	entire property:	portion you own:
	Other information:		Φ.	Φ
		☐ Check if this is community property (see instructions)	\$	\$
	<i>mples:</i> Boats, trailers, motors, personal v No	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)		d claims on Schedule D:
If you	u own or have more than one, list here:			
4.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Clain	
	Year:	Debtor 2 only	Current value of the	
		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another	, , ,	, ,
			\$	\$
		Check if this is community property (see instructions)	Ψ	Ψ
		in Structions)		
5. Add	the dollar value of the portion you ow	n for all of your entries from Part 2, including any entries	s for pages	\$ 0.00
you l	have attached for Part 2. Write that nu	ımber here		τ
			<u>l</u>	

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Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	☑ No	7
	Yes. Describe	\$
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
	collections; electronic devices including cell phones, cameras, media players, games	
	☑ No	
	Yes. Describe	\$
		Φ
Ω	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	No	
	Yes. Describe	1.
	Tes. Describe	\$
	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
	and kayaks; carpentry tools; musical instruments	
	No No	7
	Yes. Describe	\$
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	No No	
	Yes. Describe	
	— 103. D030Hb0	\$
11	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	No	
		1
	Yes. Describe	\$
12	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	gold, silver	
	☑ No	
	Yes. Describe	•
	■ 162. Describe	\$
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	☑ No]
	Yes. Describe	\$
	L.	1
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	☑ No	
	☐ Yes. Give specific]
	information	\$
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$ <u>0.00</u>
	for Part 3. Write that number here	

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Part 4:

Describe Your Financial Assets

Do	you own or have any l	egal or equitable interest in a	nny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash Examples: Money you h No	ave in your wallet, in your hom	e, in a safe deposit box, and on hand when you file	your petition	
			C	Cash:	\$
			nts; certificates of deposit; shares in credit unions, lultiple accounts with the same institution, list each.	brokerage houses,	
	□ No ☑ Yes		Institution name:		
		17.1. Checking account:	JP Morgan Chase Bank accounty ending	g in 7021	\$ <u>359.00</u>
		17.2. Checking account:			\$
		17.3. Savings account:	AllSteel Credit Union		\$22.13
		17.4. Savings account:			\$
		17.5. Certificates of deposit:			\$
		17.6. Other financial account:			\$
		17.7. Other financial account:			\$
		17.8. Other financial account:			\$
		17.9. Other financial account:			\$
		or publicly traded stocks nvestment accounts with broke Institution or issuer name:	erage firms, money market accounts		\$
					\$
	Non-publicly traded sto an LLC, partnership, a		ated and unincorporated businesses, including	an interest in	
	ĭ No	Name of entity:	%	% of ownership:	
	Yes. Give specific information about			%	\$
	them				\$
				%	\$

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page 6

First Name	Middle Name Last	Name	
20. Government and co	orporate bonds and other	negotiable and non-negotiable instruments	
Negotiable instrumer Non-negotiable instr	nts include personal checks uments are those you cann	s, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
☑ No			
Yes. Give specific information about			
them			\$
			\$
			\$
Of Batimamout on name			
21. Retirement or pens <i>Examples:</i> Interests		(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No			
Yes. List each			
account separate	ely Type of account:	Institution name:	
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:		\$
	Keogh:		\$
	Additional account:		\$
	Additional account:		\$
			Ψ
	sed deposits you have ma	de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications	
☐ Yes	Insti	tution name or individual:	
	Electric:		\$
	Gas:		\$
	Heating oil:		\$
	Security deposit on renta	al unit:	\$
	Prepaid rent:		\$
	Telephone:		\$
	Water:		\$
	Rented furniture:		\$
	Other:		\$
23. Annuities (A contrac	t for a periodic payment of	money to you, either for life or for a number of years)	
☑ No			
☐ Yes	Issuer name and descr	ription:	
			\$
			\$

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24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). X No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☑ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses X No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☑ No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☑ No ☐ Yes. Give specific information.....

X No

X No

X No

X No

☑ No.

to set off claims

3561 ase 16-Jose

Company name:

31. Interests in insurance policies

☐ Yes. Name the insurance company

property because someone has died.

☐ Yes. Give specific information.....

☐ Yes. Describe each claim.....

☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

☐ Yes. Give specific information......

38. Accounts receivable or commissions you already earned

of each policy and list its value....

Doc 1 Filed 04/20/16 Entered 04/20/16 19:47:07 Desc Main Esparz Document Page 17 of Pounder (if known) Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$381.13 for Part 4. Write that number here

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?	
☑ No. Go to Part 6.	
☐ Yes. Go to line 38.	
	Current value of the portion you own?
	Do not deduct secured claims or exemptions.

☐ Yes. Describe..... 39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
☑ No	
☐ Yes. Describe	\$
ľ	-

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☐ Yes.....

Official Form 106A/B

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Doc 1 Filed 04/20/16 Entered 04/20/16 19:47:07 Desc Main Esparz Document Page 18 of Page Debtor 1 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No ☐ Yes. Describe.... 41. Inventory No ☐ Yes. Describe.... 42. Interests in partnerships or joint ventures X No. ☐ Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☑ No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list ☑ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish X No

Schedule A/B: Property

Case 16-13561 Manuel

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Desc Main

\$143,381.13

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63. Total of all property on Schedule A/B. Add line 55 + line 62.

Attachment Debtor: Jose Manuel Esparza Case No:

Attachment 1

Town & Country

- ***Property personal curr value full non-numeric RMC***
- ***Property personal current value non-numeric RMC***

Attachment 2

- ***Property personal curr value full non-numeric RMC***
- ***Property personal current value non-numeric RMC***

Debtor 1 Jose Manuel Esparza

First Name Middle Name Last Name

Debtor 2 Mayra Esparza

(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District of Illinois

Case number (If known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

. For any pr	roperty you list on Schedule A/B t	hat you claim as exem	pt, fill in the information below.	
	cription of the property and line on A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description Line from Schedule	n: ————————————————————————————————————	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description Line from Schedule		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description Line from Schedule		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your case:						
Debtor 1	Jose Manuel Espa					
	First Name	Middle Name	Last Name			
Debtor 2	Mayra Esparza					
(Spouse, if filing) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern Distric	et of Illinois			
Case number (If known)						

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do any creditors	have claims	secured b	by your	property?
----	------------------	-------------	-----------	---------	-----------

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

for each claim. If more than one creditor	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecure portion If any
CENLAR	Describe the property that secures the claim:	\$ 107,685.00	\$_143,000.00	\$
Creditor's Name 425 Phillips Blvd Number Street	Principal Residence, 142 Lakeshore Drive, Oswego IL 60543			
Ewing NJ 08618 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	 ☒ An agreement you made (such as mortgage or secured car loan) ☒ Statutory lien (such as tax lien, mechanic's lien) ☒ Judgment lien from a lawsuit ☒ Other (including a right to offset) 	-		
Date debt was incurred 2013-07	Last 4 digits of account number 5 2 3 2	24 400 00	0.00	
Chrysler Capital Creditor's Name	Describe the property that secures the claim:	\$ <u>34,409.00</u>	\$ 0.00	.\$
Po Box 961275 Number Street	Dodge Ram 2014			
Fort Worth TX 76161 City State ZIP Code Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	_		
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	Other (including a right to offset)	_		
☐ Check if this claim relates to a community debt	, , , , , , , , , , , , , , , , , , , ,			
Date debt was incurred 2014-09	Last 4 digits of account number 1 0 0 0			

Case 16-13561 Doc 1 Filed 04/20/16 Entered 04/20/16 19:47:07 Fill in this information to identify your case: Jose Manuel Esparza Debtor 1 Middle Name Last Name Mayra Esparza Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: **List All of Your PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. X Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount amount 2.1 \$<u>722</u>.07 \$722.07 \$ 0.00 Internal Revenue Service Last 4 digits of account number 4 5 6 1 Priority Creditor's Name When was the debt incurred? P Box 7317 Number As of the date you file, the claim is: Check all that apply. Philadelphia PA See ☐ Contingent ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify X No Yes 2.2 John Barkowski Last 4 digits of account number __ \$ 2,500.00 \$ 2,500.00 \$ 0.00 Priority Creditor's Name 09/2015 When was the debt incurred? See Attachment 2 As of the date you file, the claim is: Check all that apply. 2600 Internationale Parkway Contingent 60517 Woodridge Unliquidated Disputed Who incurred the debt? Check one. ■ Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations ☐ Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another ☐ Claims for death or personal injury while you were Check if this claim is for a community debt Other, Specify Wages/Salaries/Commissions Is the claim subject to offset? No

Yes

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Pa	rt 1: Your PRIORITY Unsecured Claims	Continuation Page			
Aft	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
2.3	Us Dept Of Ed/glelsi	Last 4 digits of account number _8581_	\$ <u>21,204.00</u>	<u>\$0.00</u>	\$0.00
	Priority Creditor's Name				
	Po Box 7860 Number Street	When was the debt incurred? 2014-01			
	Number Street	As of the date you file, the claim is: Check all that apply.			
	Madison WI 53707 City State ZIP Code	☐ Contingent☐ Unliquidated			
	State Zir Code	Disputed			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	Type of PRIORITY unsecured claim:			
	☑ Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
	☐ At least one of the debtors and another	☐ Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated			
	In the plains publicates offers	Other. Specify			
	Is the claim subject to offset?				
	☑ No ☐ Yes				
	res				
2.4		Last 4 divite of account number	\$	\$	\$
	Priority Creditor's Name	Last 4 digits of account number	Ψ	_ Ψ	Ψ
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
		☐ Disputed			
	Who incurred the debt? Check one.	Towns of DDIODITY and a second a letter			
	☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
		☐ Claims for death or personal injury while you were intoxicated			
	☐ Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	□ No				
	☐ Yes				
2.5					
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Thomas Greater 3 Name	When was the debt incurred?			
	Number Street	Wilen was the dept incurred:			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	,	Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
	☐ At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other. Specify			
	la the plains publication office.	uner. Specify			
	Is the claim subject to offset?				
	□ No □ Yes				

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First Name Middle Name Last Name Document

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о.	2.

List All of Your NONPRIORITY Unsecured Claims

	Do any creditors have nonpriority unsecured claims against you' No. You have nothing to report in this part. Submit this form to the Yes		
	List all of your nonpriority unsecured claims in the alphabetical or priority unsecured claim, list the creditor separately for each claim. Fo included in Part 1. If more than one creditor holds a particular claim, li fill out the Continuation Page of Part 2.	r each claim listed, identify what type of claim it is. Do not list	claims already
			Total claim
			Total olalli
l.1	Advocate Health Care	Last 4 digits of account number 2 1 3 4	_{\$} 0.00
	Nonpriority Creditor's Name	When was the debt incurred? 03/2016	\$ <u>0.00</u>
	PO Box 4256	When was the debt incurred? 03/2016	
	Number Street		
	Carol Stream IL 60197	As of the data was file the alabatic in Ol. 1. II d. t.	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	☐ Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
		Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	X No	Other. Specify Medical Services	
	☐ Yes		
			. 020 00
1.2	Allsteel Credit Union	Last 4 digits of account number 2 0 8 3	\$_830.00
	Nonpriority Creditor's Name	When was the debt incurred? $\underline{2012-09}$	
	1 W Merchants dr		
	Number Street		
	Oswego IL 60543	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	_	Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	☑ No	Other. Specify Credit Card Charges	
	☐ Yes		
1.3	Allete al Cu		
	Allsteel Cu Nonpriority Creditor's Name	Last 4 digits of account number 1 1 1 9	\$ 367.00
	. ,	When was the debt incurred? 2013-02	
	1 West Merchants Drive		
	Oswego IL 60543		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	•	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	□ Debtor 1 only	☐ Disputed	
	Debtor 2 only	•	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	•	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	☑ No	Other. Specify Credit Card Charges	
	Yes		

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Part 2:

After	listing any entries on this page, number them beginning with 4	.5, followed by 4.6, and so forth.	Total claim
	Best Buy, CBNA	Last 4 digits of account number 6 9 6 5	\$89.00
_	Nonpriority Creditor's Name 50 Northwest Point Road	When was the debt incurred? 2014-10	
_	Number Street Elk Grove Village IL 60007 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
\ 	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ the claim subject to offset? ☐ No ☐ Yes	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card Charges 	
	Cadence Health Nonpriority Creditor's Name	Last 4 digits of account number 9 6 7 0	\$ 660.25
	Central Dupage Hospital PO Box 4090	When was the debt incurred? 12/02/2015	
	Number Street Carol STream IL 60197-4090	As of the date you file, the claim is: Check all that apply.	
	State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt s the claim subject to offset? □ No □ Yes	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical Services 	
	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number 9 3 7 4	\$ 539.00
	15000 Capital One Dr	When was the debt incurred? 2013-02	
_	Richmond VA 23238 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
1	Who incurred the debt? Check one.	Disputed	
[[[[□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt s the claim subject to offset? □ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card Charges	

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Part 2:

After listing any entries on this page, number them beginning with	a 4.5, followed by 4.6, and so forth.	Total claim
Capital One Bank Usa N.A.	Last 4 digits of account number 1 3 6 8	\$ <u>147.00</u>
Nonpriority Creditor's Name 15000 Capital One Dr	When was the debt incurred? 2014-09	
Number Street	As of the date you file, the claim is: Check all that apply.	
Richmond VA 23238 City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Credit Card Charges	
No Yes ∴		
Dreyer Medical Clinic	Last 4 digits of account number 4 9 4 9	\$ <u>940.00</u>
Nonpriority Creditor's Name	When was the debt incurred? 05/2015	
PO Box 105173 Number Street	As of the data confile the claim in O	
Atlanta GA 30348-5173	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	Toron (NONDRIODITY and a second delains	
☑ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	 □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Services 	
☑ No ☐ Yes	, , , , , , , , , , , , , , , , , , , ,	
GC Services Limited Partnership	Last 4 digits of account number 2 7 1 6	<u>\$ 1,212.29</u>
Nonpriority Creditor's Name	When was the debt incurred? 2014	
630 Gulfton Number Street		
Houston TX 77081	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	 □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Collections for Sprint Cell phone 	
☑ No	Office: Specify Confections for Ophinic Cell phone	
Yes		

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Afte	r listing any entries on this page, number them beginning with 4	.5, followed by 4.6, and so forth.	Total claim
4.10	Hy Cite/royal Prestige	Last 4 digits of account number 1 1 5	\$ <u>1,998.00</u>
	Nonpriority Creditor's Name 333 Holtzman Rd	When was the debt incurred? 2015-09	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Madison WI 53713 City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one. Debtor 1 only	☐ Unliquidated ☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	_	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other Specify Credit Card Charges	
	☑ No □ Yes		
4.11	Kia Motors Finance	Last 4 digits of account number 2 1 3 7	\$ 11,350.24
	Nonpriority Creditor's Name	When was the debt incurred? 2014-12	
	4000 Macarthur Blvd Ste		
	Newport Beach CA 92660	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	_	☐ Disputed	
	□ Debtor 1 only □ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		
	☐ At least one of the debtors and another	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that	
	Observation in the annual content of the	you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify See Attachment 3	
	☑ No ☐ Yes		
4.12	Kohls/capone	Last 4 digits of account number 0 1 0 0	\$ <u>67.00</u>
	Nonpriority Creditor's Name	When was the debt incurred? 2012-11	
	N56 W 17000 Ridgewood Dr		
	Menomonee Falls WI 53051	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who is suggested that date (O.C.)	☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Tupo of NONDRIORITY upage red eleims	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	□ No □ Yes		

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Afte	r listing any entries on this page, number them beginning with 4.	.5, followed by 4.6, and so forth.	Total claim
4.13	North Aurora Dental Associates	Last 4 digits of account number 3 4 3 9	\$ <u>536.50</u>
	Nonpriority Creditor's Name 100 N. Lincolnway	When was the debt incurred? 2015	
	Number Street North Aurora IL 60542-1150	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	□ Debtor 1 only □ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Dental Services	
	■ No	Officer: Specify Derital derivices	
	☐ Yes		
4.14	Pediatric Faculty Foundation Inc	Last 4 digits of account number 9 5 0 9	\$ <u>856.00</u>
	Nonpriority Creditor's Name	When was the debt incurred? 01/2016	
	PO Box 4051 Number Street		
	Carol Stream IL 60197	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	☐ At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☑ No	☑ Other. Specify Medical Services	
	□ Yes		
4.15	5 15	Last 4 digits of account number 9 6 0 1	\$_2,508.00
	Personal Finance Nonpriority Creditor's Name	0045.00	
	316 W Indian Trl	When was the debt incurred? 2015-09	
	Aurora IL 60506	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Time of NONDRIGHTY was a sund all in	
	☑ Debtor 2 only☑ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	☑ Other. Specify Personal Loan	
	☑ No ☐ Yes		
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After	listing any entries on this page, number them beginning with 4.	5, followed by 4.6, and so forth.	Total claim
1.16	Rush Copley Medical Group Nonpriority Creditor's Name	Last 4 digits of account number 6 8 6 7	<u>\$175.00</u>
	PO Box 2091	When was the debt incurred? 06/2015	
	Number Street Aurora IL 60507-2091	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Medical Services	
	☑ No □ Yes		
1.17	Springleaf Financial	Last 4 digits of account number 8 0 3 8	\$ <u>4,101.00</u>
	Nonpriority Creditor's Name	When was the debt incurred? 2014-03	
	12337 S. State Rt. 59 Suite 139		
	Plainfield IL 60585-4605	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	☑ Debtor 1 only	a bisputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	☑ Other. Specify Personal Loan	
	☑ No □ Yes		
1.18		Last 4 digits of account number	\$ Unknown
	Stark Collection Agency Nonpriority Creditor's Name	-	
	6425 Odana Road	When was the debt incurred? 2012	
	Number Street Madison WI 53719	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only	■ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other Specify collections	
	☑ No		
	Yes		_

Part 2:

Afte	r listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
4.19	Syncb/ Blains Farm & Fleet	Last 4 digits of account number 2 4 0	\$ <u>427.40</u>
	Nonpriority Creditor's Name 950 Forrer Blvd	When was the debt incurred? 2013-08	
	Number Street Kettering OH 45420	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card Charges 	
4.20	Syncb/hh Gregg	Last 4 digits of account number 8 4 9 0	\$ <u>5,490.00</u>
	Nonpriority Creditor's Name C/o P.o. Box 965036	When was the debt incurred? 2013-07	
	Number Street Orlando FL 32896	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	 □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card Charges 	
	No Yes		
4.21	Syncb/lumber Liquidator Nonpriority Creditor's Name C/o Po Box 965036 Number Street Orlando FL 32896 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Last 4 digits of account number 9 9 8 6 When was the debt incurred? 2014-03 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	\$2,791.00
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card Charges 	

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Afte	er listing any entries on this page, number them beginning with	1 4.5, followed by 4.6, and so forth.	Total claim
4.22	Syncb/TJ Maxx	Last 4 digits of account number 2 7 3 8	\$ <u>137.00</u>
	Nonpriority Creditor's Name Po Box 965005	When was the debt incurred? 2014-03	
	Number Street Orlando FL 32896 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	
	Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes	 Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card Charges 	
4.23	Syncb/tjx Cos Dc Nonpriority Creditor's Name	Last 4 digits of account number 4 4 6 6	\$ 2,260.00
	Po Box 965005 Number Street Orlando FL 32896	When was the debt incurred? 2013-06 As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☒ Other. Specify Credit Card Charges 	
4.24	Syncb/value City Furniture Nonpriority Creditor's Name C/o Po Box 965036 Number Street Orlando FL 32896 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number _5 _9 _6 _0 When was the debt incurred?2013-11 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card Charges	\$ <u>939.00</u>

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ter listing any entries on this page, number them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
Syncb/walmart Nonpriority Creditor's Name	Last 4 digits of account number 6 0 3 2	\$ <u>1,722.00</u>
4125 Windward Plaza	When was the debt incurred? 2013-02	
Number Street Alpharetta GA 30005	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☑ No ☐ Yes	☑ Other. Specify Credit Card Charges	
Supply (updpopt	Last 4 digits of account number _1 _6 _8 _7_	\$ 2,174.00
Syncb/walmart Nonpriority Creditor's Name		Ψ_,
4125 Windward Plaza	When was the debt incurred? 2013-02	
Alpharetta GA 30005	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed☐	
Debtor 1 only		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	■ Other. Specify Credit Card Charges	
☑ No □ Yes		
The Home Depot Credit Services	Last 4 digits of account number 6 9 2 3	\$ 698.00
Nonpriority Creditor's Name Po Box 6497	When was the debt incurred? 2014-05	
Number Street Sioux Falls SD 57117	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed☐	
☑ Debtor 1 only	_ 5,000.00	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
·	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☑ No ☐ Yes	☑ Other. Specify Credit Card Charges	

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
6a. Domestic support obligations	6a.	\$0.00
6b. Taxes and certain other debts you owe the government		<u>\$21,926.07</u>
6c. Claims for death or personal injury while you were intoxicated6d. Other. Add all other priority unsecured claims. Write that amount here.	6c.	<u>\$0.00</u>
	6d.	+ \$2,500.00
6e. Total. Add lines 6a through 6d.	6e.	<u>\$24,426.07</u>
		Total claim
6f. Student loans		\$ 0.00
 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 	6g.	\$ <u>0.00</u>
	6h.	\$0.00
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$42,947.68
6j. Total. Add lines 6f through 6i.	6j.	_{\$} 42,947.68
	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.

Attachment Debtor: Jose Manuel Esparza Case No:

Attachment 1

19101-7317

Attachment 2

C/O Midwest Warehouse & Distribution System Inc

Attachment 3

Debtors voluntarily relinquished Kia Automobile in March of 2016

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Fill in this information to identify your case:				
Debtor	Jose Manuel Esp First Name	parza Middle Name	Last Name	
Debtor 2	Mayra Esparza			
(Spouse If filing)		Middle Name	Last Name	
United States I	Bankruptcy Court fo	or the: Northern District of III	inois	
Case number (If known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with wh	om you l	nave the contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	-
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					_
	Name				
	Number	Street			
	City		State	ZIP Code	_

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Debtor 1	Jose Manuel Espa	rza		
	First Name	Middle Name	Last Name	
Debtor 2	Mayra Esparza			
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Case number (If known)	Bankruptcy Court for the	ne: Northern District of II	linois	

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	No you have	any codebtors?	(If you are filing a joint case, do not	list either spouse a	as a codebtor.)
	△ No → Yes				
		at 0a.a.a. b.aa			2 (Community and and a state a and to mitaria a include
			you lived in a community property siana, Nevada, New Mexico, Puerto		? (Community property states and territories include
_	No. Go to		Siaria, Nevada, New Mexico, Fuerte	rrico, rexas, was	simily on, and wisconsin.)
			er spouse, or legal equivalent live w	ith you at the time	2
`	■ Test bla ;	your opouse, roini	or opouse, or regar equivalent live w	iai you at allo allio	·
		n which communi	ty state or territory did you live?		Fill in the name and current address of that person.
					_
	Name	of your spouse, former	spouse, or legal equivalent		
	Normalia	011			-
	Numbe	er Street			
	City		State	ZIP Code	-
					or if your spouse is filing with you. List the person er. Make sure you have listed the creditor on
					ule G (Official Form 106G). Use Schedule D,
		•	to fill out Column 2.	ooth j, or scried	ule o (official Form 1000). Ose ochedule D,
	Column 1: Y	our codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3.1					
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City		State	ZIP Code	
3.2	,		0.000		
0.2	Name				Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
2.0	City		State	ZIP Code	
3.3					Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
					Conedule O, line
	City		State	ZIP Code	

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		egament rage	
Fill in this in	formation to identify your case:		
Debtor 1	Jose Manuel Esparza First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	Mayra Esparza First Name Middle Name	Last Name	
United States E	Bankruptcy Court for the: Northern District of I	llinois	
Case number (If known)			Check if this is:
			An amended filing
			☐ A supplement showing post-petition chapter 13 income as of the following date:
Official Fo	orm 106l		MM / DD / YYYY
Sched	ule I: Your Income	e	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

Describe Employm	ient					
Fill in your employment information.		Debtor 1			Debtor 2 or non-fi	ling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status		ed		EmployedNot employed	
Include part-time, seasonal, or self-employed work.		Warehouse Sup	onvic	or	Administrative Assist	cant inclid as 1000
Occupation may Include student or homemaker, if it applies.	Occupation	warenouse Sup	DEI VIS	JI .	Administrative Assist	arit, paid as 1099
	Employer's name	Midwest Wareho	ouse		See Attachment 1	
	Employer's address	1200 Orchard G	atewa	y Blvd	Number Street	
					Spouse employer	ctato PMC
		City	Stat	e ZIP Code	City	State ZIP Code
	How long employed there	e? <u>1 year</u>			2 years	
Part 2: Give Details About	t Monthly Income					
Estimate monthly income as of spouse unless you are separated		. If you have noth	ing to	report for any line, w	rite \$0 in the space. Incl	ude your non-filing
If you or your non-filing spouse had below. If you need more space, a	ave more than one employer	r, combine the info	rmati	on for all employers	for that person on the line	es
				For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sal deductions). If not paid monthly,			2.	\$ 4,333.33	\$ 840.00	i
3. Estimate and list monthly over	rtime pay.		3.	+ \$ 0.00	+ \$ 0.00	
4. Calculate gross income. Add li	ine 2 + line 3.		4.	\$ <u>4,333.33</u>	\$_840.00	

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Debtor 1

Jose Manuel Esparza
First Name Middle Name

Middle Name

Last Name

Page 39 of 70 Case number (if known)_

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$_4,333.33	\$ 840.00	
ist all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$ 686.10	\$ 120.00	
5b. Mandatory contributions for retirement plans	5b.	\$_0.00	_ _ \$_0.00	
5c. Voluntary contributions for retirement plans	5c.	\$_0.00	\$_0.00	
5d. Required repayments of retirement fund loans	5d.	\$_0.00	\$ 0.00	
5e. Insurance	5e.	\$ <u>540.32</u>	\$ 0.00	
5f. Domestic support obligations	5f.	\$ 0.00	\$ 0.00	
5g. Union dues	5g.	\$ 0.00	\$ 0.00	
5h. Other deductions. Specify:	_	+\$ 0.00	+ \$ 0.00	
Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$		\$_1,226.42	\$_120.00	
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 3,106.91	<u>\$_720.00</u>	
List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_0.00	\$_0.00	
8b. Interest and dividends	8b.	\$ 0.00	\$_0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ent		_	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_0.00	\$_0.00	
8d. Unemployment compensation	8d.	\$_0.00	\$_0.00	
8e. Social Security	8e.	\$_0.00	\$_0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista	nco			
that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	iice	\$	\$	
Specify:	8f.			
8g. Pension or retirement income	8g.	\$ 0.00	\$_0.00	
8h. Other monthly income. Specify: See Attachment 2	8h.	+\$0.00	+\$200.00	
Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_0.00	\$_200.00	
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ 3,106.91	+ \$ <u>920.00</u> =	\$ 4,026.91
State all other regular contributions to the expenses that you list in <i>Sche</i>	dule .	I.		
Include contributions from an unmarried partner, members of your household, friends or relatives.	your c	lependents, your ro	ommates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are	not a	vailable to pay expe	enses listed in Schedule J.	
Specify:			11. +	\$ 0.00
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain			•	\$_4,026.91
,		,		Combined monthly inco

Addendum

Attachment 1

Quad County African American Chamber of Commerce, through March 20, 2016 Attachment 2

Joint Debtor cleans houses for friends and family from time to time

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Fill in this in	formation to ide	entify your case:		
Debtor 1	Jose Manuel Esp First Name Mayra Esparza	Middle Name	Last Name	Check if this is:
(Spouse, if filing)	First Name	Middle Name r the: Northern District of I	Last Name	 An amended filing A supplement showing post-petition c expenses as of the following date:
Case number (If known)				MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

Home maintenance, repair, and upkeep expenses

Homeowner's association or condominium dues

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Hou	sehold				
Is this a joint case?					
No. Go to line 2.X Yes. Does Debtor 2 live in a s	separate household?				
No □ Yes. Debtor 2 must file	e Official Forms 106J-2, Expenses for	Separate Household of Debtor 2.			
2. Do you have dependents?	☐ No	Dependent's relationship to		Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2		age	with you?
Do not state the dependents' names.		Daughter	. <u>7</u>	7	☐ No ☒ Yes
		Daughter		1	□ No ☑ Yes
		Son		<u> </u>	□ No ☑ Yes
					☐ No ☐ Yes
					□ No □ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	NoYes				
Part 2: Estimate Your Ongoi	ng Monthly Expenses				
Estimate your expenses as of your expenses as of a date after the ban applicable date.	bankruptcy filing date unless you a kruptcy is filed. If this is a supplem	•		•	•
Include expenses paid for with non such assistance and have included	•			Your expe	nses
4. The rental or home ownership e any rent for the ground or lot.	expenses for your residence. Include	e first mortgage payments and	4.	\$ <u>1,300.00</u>	
If not included in line 4:					
4a. Real estate taxes			4a.	\$ 0.00	
4b Property homeowner's or re	enter's insurance		4b	\$ 0.00	

\$ 200.00

\$<u>165.00</u>

4c.

4d.

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Debtor 1

Jose Manuel Esparza
First Name Middle Name

irst Name Middle Name Last Name

Case number (if known)_

			Your expenses
_			\$ 0.00
	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		140.00
	6a. Electricity, heat, natural gas	6a.	\$_140.00 \$_75.00
	6b. Water, sewer, garbage collection	6b.	\$ <u>75.00</u> \$ 85.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	-
	6d. Other. Specify:	6d.	\$_0.00
7.	Food and housekeeping supplies	7.	\$_650.00
8.	Childcare and children's education costs	8.	\$ <u>150.00</u>
9.	Clothing, laundry, and dry cleaning	9.	\$_100.00
10.	Personal care products and services	10.	\$_0.00
11.	Medical and dental expenses	11.	\$ <u>100.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$_0.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$_0.00
14.	Charitable contributions and religious donations	14.	\$_0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$_0.00
	15b. Health insurance	15b.	\$_0.00
	15c. Vehicle insurance	15c.	\$_127.00
	15d. Other insurance. Specify: all kids	15d.	\$_25.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _2015 Fed taxes	16.	\$_100.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$ <u>364.00</u>
	17b. Car payments for Vehicle 2	17b.	\$_0.00
	17c. Other. Specify: personal loan from employor (deducted from paycheck)	17c.	\$ <u>4</u> 30.00
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$ 0.00
40	Other permants you make to compart others who do not the will you		Ψ
19.	Other payments you make to support others who do not live with you.	40	\$ 0.00
	Specify:	19.	\$_0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.	
	20a. Mortgages on other property	20a.	\$ 0.00
	20b. Real estate taxes	20b.	\$ 0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$ <u>0.00</u>
	20d. Maintenance, repair, and upkeep expenses	20d.	\$ <u>0.00</u>
	20e. Homeowner's association or condominium dues	20e.	\$ <u>0.00</u>

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Debtor 1	Jose Manuel Esparza First Name Middle Name Last Name	Case number (if known)	
21. Other .	Specify:		+\$_0.00
22a. Ad 22b. Cd	ate your monthly expenses. Id lines 4 through 21. In py line 22 (monthly expenses for Debtor 2), if any, from Official Form line 22a and 22b. The result is your monthly expenses.	106J-2 22.	\$ 4,011.00 \$_ \$ 4,011.00
23. Calculat	te your monthly net income.		
23a. Co	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$ <u>4,026.91</u>
23b. Co	opy your monthly expenses from line 22 above.	23b.	- \$4,011.00
	ubtract your monthly expenses from your monthly income. ne result is your monthly net income.	23c.	\$ 15.91
For exar	expect an increase or decrease in your expenses within the year mple, do you expect to finish paying for your car loan within the year of payment to increase or decrease because of a modification to the te	or do you expect your	
ĭ No.			
☐ Yes.	Explain here:		

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Fill in this in	formation to identify	your case:	
Debtor 1	Jose	Manuel	Esparza
	First Name	Middle Name	Last Name
Debtor 2	Mayra		Esparza
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern District of Illinois	
Case number (If known)			

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

× 1	Give Details About t is your current marital s Married Not married		us and Where Yo	ou Lived Before	
×ı	ng the last 3 years, have yolo Yes. List all of the places you Debtor 1:	-	ears. Do not include Dates Debtor 1	where you live now.	Dates Debtor 2
	Number Street		From To	Same as Debtor 1 Number Street	Ilived there Same as Debtor 1 From To
-	Number Street City	State ZIP Code State ZIP Code	From To	City State ZIP Code Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor 1 From To
and	in the last 8 years, did yo territories include Arizona,	u ever live with a sp e California, Idaho, Loui	isiana, Nevada, Nev	alent in a community property state or territory? v Mexico, Puerto Rico, Texas, Washington, and Wiso	(Community property states consin.)

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Did you have any income from employmen Fill in the total amount of income you received If you are filing a joint case and you have income	d from all jobs and all busir	nesses, including part-tir	me activities.	dar years?
□ No☑ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions an exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tipsOperating a business	<u>\$15,000.00</u>	X Wages, commissions, bonuses, tips☐ Operating a business	\$_2,400.00
For last calendar year: (January 1 to December 31, 2015 YYYY	Wages, commissions, bonuses, tipsOperating a business	\$ <u>49,002.00</u>	☑ Wages, commissions, bonuses, tips☑ Operating a business	\$ 11,378.00
For the calendar year before that: (January 1 to December 31, 2014		\$ <u>42,989.00</u>	₩ Wages, commissions, bonuses, tips Operating a business	\$ <u>1,300.00</u>
Did you receive any other income during the Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you reco	of other income are aling ridends; money collected beived together, list it only	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1.	
Did you receive any other income during the Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you list each source and the gross income from each of the Include Inc	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you reco	of other income are aling ridends; money collected beived together, list it only	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1.	
Did you receive any other income during the Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from each	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you reco	of other income are aling ridends; money collected beived together, list it only	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1.	
Did you receive any other income during the Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from each of No	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece each source separately. Do	of other income are aling ridends; money collected beived together, list it only	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.	Gross income from each source
Did you receive any other income during the Include income regardless of whether that income other public benefit payments; pensions; winnings. If you are filing a joint case and you will be the case and you have a source and the gross income from the the gross income	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece each source separately. Do Debtor 1	of other income are alingidends; money collected eived together, list it only a not include income that Gross income from each source (before deductions and	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and
Did you receive any other income during the Include income regardless of whether that income during the Include income regardless of whether that income dother public benefit payments; pensions; winnings. If you are filing a joint case and you list each source and the gross income from the Image of the Included Provided Provi	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece each source separately. Do Debtor 1	of other income are alingidends; money collected eived together, list it only a not include income that Gross income from each source (before deductions and exclusions)	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and
Did you receive any other income during the Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece each source separately. Do Debtor 1	of other income are alingidends; money collected eived together, list it only a not include income that Gross income from each source (before deductions and exclusions)	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and
Did you receive any other income during the Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece each source separately. Do Debtor 1	of other income are alingidends; money collected eived together, list it only onot include income that onot include income that onot include income from each source (before deductions and exclusions) \$	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
Did you receive any other income during the Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from the Image of the I	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece each source separately. Do Debtor 1	of other income are alinitidends; money collected eived together, list it only a not include income that Gross income from each source (before deductions and exclusions) \$	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
Did you receive any other income during the Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from the the gross i	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece each source separately. Do Debtor 1	of other income are alinidends; money collected eived together, list it only not include income that Gross income from each source (before deductions and exclusions) \$	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
Did you receive any other income during the Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from the the gross i	nis year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece each source separately. Do Debtor 1	of other income are alinitidends; money collected eived together, list it only a not include income that the following forms income from each source (before deductions and exclusions) \$	nony; child support; Social S d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)

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t 3: Lis	st Certain Paymer	nts You M	lade Befor	e You Filed	for Bankruptcy		
re either l	Debtor 1's or Debtor	2's debts	nrimarily co	nsumer deht	s?		
	either Debtor 1 nor D curred by an individu					defined in 11 U.S.C. § 101(8) as
	•		•	•	y any creditor a total of \$	6,425* or more?	
	No. Go to line 7.						
	Yes. List below each total amount yo	ou paid tha	t creditor. Do	not include pa	\$6,425* or more in one or ayments for domestic sup lents to an attorney for th	port obligations, such as	
* 5		•			•	er the date of adjustment.	
XI Ves De	ebtor 1 or Debtor 2 o	r hoth hav	e primarily	consumer del	nte		
					y any creditor a total of \$	600 or more?	
				,, a.a , oa po	-,, σ. σαισι α ισιαι σι φ		
	No. Go to line 7.						
	creditor. Do no	t include p	ayments for o	domestic supp	\$600 or more and the tota ort obligations, such as c y for this bankruptcy case	nild support and	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
					\$	\$	☐ Mortgage
	Creditor's Name						☐ Car
	Number Street						☐ Credit card
	Number Street						Loan repayment
							☐ Suppliers or vendo
	City	State	ZIP Code				☐ Other
	City	State	ZIF Code				
					\$	\$	
	Creditor's Name				Ψ	. Ψ	☐ Mortgage
							Car
	Number Street						Credit card
							Loan repayment
							Suppliers or vendo
	City	State	ZIP Code				Other
				-			
					\$	\$	☐ Mortgage
	Creditor's Name						☐ Car
							Credit card
	Number Street						Loan repayment
							☐ Suppliers or vendo
							Other
							I I ()thor

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Case number (if known)_

Jose Manuel Esparza
First Name Middle Name

Last Name

Debtor 1

corporations of which you gent, including one for such as child support a	elatives; any gene ou are an officer, r a business you o	ral partners; re director, perso	elatives of any on in control, or	general partners; partners	artnerships of which	no was an insider? In you are a general partner; It securities; and any managing It domestic support obligations,
☑ No						
Yes. List all paymer	nts to an insider.					
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				\$	\$	
Number Street						
		770.0				
City	State	ZIP Code		\$	\$	
Insider's Name				*	*	
Number Street						
City	State	ZIP Code				
	ou filed for bank	ruptcy, did yo	u make any p	ayments or transf	er any property on	account of a debt that benefited
n insider? nclude payments on de	ebts guaranteed o	or cosigned by	an insider. Dates of	Total amount	Amount you still owe	Reason for this payment
n insider? nclude payments on de No	ebts guaranteed o	or cosigned by	an insider.	Total amount	Amount you still	
n insider? nclude payments on de No	ebts guaranteed o	or cosigned by	an insider. Dates of	Total amount	Amount you still	Reason for this payment
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all such matters, including pers contract disputes.	onal injury cases,	small claims actions, di	vorces, collection suits, paterni	ty actions, suppo	rt or custody modificatio
lo 'es. Fill in the details.					
	Natur	e of the case	Court or agency		Status of the case
Case title					— Pending
Case lille			Court Name		On appeal
			Number Street		Concluded
Case number					
			City State	e ZIP Code	
Case title					— Pending
Case title			Court Name		On appeal
			Number Street		Concluded
Case number					
			City State	e ZIP Code	
lo. Go to line 11. 'es. Fill in the information below	w.				
	w.	Describe the proper	ty	Date	Value of the property
	w.	Describe the proper	ty	Date	
	w.	Describe the proper	ty	Date	Value of the property
es. Fill in the information below	w.	Describe the proper		Date	
'es. Fill in the information below	w.	-	ned	Date	
'es. Fill in the information below	w.	Explain what happe Property was Property was	ned repossessed. foreclosed.	Date	
Creditor's Name Number Street		Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished.	Date	
Creditor's Name Number Street	W. State ZIP Code	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.	Date	\$
Creditor's Name Number Street		Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$
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Jose Manuel Esparza Debtor 1 Last Name Middle Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☐ Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX-___ _ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☑ No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Describe the gifts Gifts with a total value of more than \$600 Dates you gave per person the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code

Person's relationship to you _

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1	Jose Manuel Esparza	Case number (if known)		
	First Name Middle Name Last	Name		
Vith	in 2 years before you filed for bankrup	tcy, did you give any gifts or contributions with a total value	of more than \$600	to any charity?
X N				
	res. Fill in the details for each gift or cont	ribution.		
			_	
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
			T	
				\$
Ō	Charity's Name			Ψ
_				\$
	Number Street			
-				
_				
C	City State ZIP Code			
rt 6:	List Certain Losses			
_				
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of property lost
		claims on line 33 of Schedule A/B: Property.		
				\$
rt 7:	List Certain Payments or Trans	sfers		
With	in 1 year before you filed for bankrupt	cy, did you or anyone else acting on your behalf pay or trans	sfer any property to	anyone you
	sulted about seeking bankruptcy or pre			
		parers, or credit counseling agencies for services required in yo	ur bankruptcy.	
□ \ □ \	No ∕es. Fill in the details.			
	res. Fill in the details.			
	Serrano, Low & Hanson	Description and value of any property transferred	Date payment or transfer was made	Amount of payme
	Person Who Was Paid		T	
	431 Williamsburg Ave		03/16/16	\$1,700.00
	Number Street		33,13,10	ψ.,. σσ.σσ
				\$
	Geneva IL 60134			•
	City State ZIP Code			
	stephanie@SLHlawfirm.com Email or website address			
	Person Who Made the Payment, if Not You			
			T. Control of the Con	

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		Description and value of any property to	ransferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid					\$
Number Street					
Number Street					\$
					Ψ
City	State ZIP Code				
Facell and the land and the land		_			
Email or website address					
Person Who Made the Payme	ent, if Not You				
,	,				
Do not include any paymen ☑ No ☐ Yes. Fill in the details.	t or transfer that y	ou listed on line 16.			
		Description and value of any property to	ransferred	Date payment or transfer was made	Amount of payme
Derson W/h - W/ D-1:/					
Person Who Was Paid					\$
					7
Number Street					
Number Street					\$
Number Street					\$
City Nithin 2 years before you		otcy, did you sell, trade, or otherwise to	ransfer any property to	anyone, other than	\$n property
City Nithin 2 years before you ransferred in the ordinary nclude both outright transfered.	filed for bankrup y course of your l ers and transfers r	btcy, did you sell, trade, or otherwise to business or financial affairs? made as security (such as the granting of the very already listed on this statement. Description and value of property transferred		ortgage on your prop	perty).
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Jose Manuel Esparza Debtor 1 Case number (if known) 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) X No ☐ Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust _ Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. ■ No ☐ Yes. Fill in the details. Date account was Last 4 digits of account number Type of account or Last balance before closed, sold, moved, instrument closing or transfer or transferred Name of Financial Institution Checking XXXX-___ _ ■ Savings Number Street ■ Money market ■ Brokerage City State ZIP Code Other ☐ Checking XXXX-____ Name of Financial Institution ☐ Savings ■ Money market Number Street ■ Brokerage Other City State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ■ No ☐ Yes. Fill in the details. Describe the contents Do you still Who else had access to it? have it? □ No Yes

City

Name of Financial Institution

State

ZIP Code

Number Street

ZIP Code

Name

City

Number Street

State

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Jose Manuel Esparza

Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you is have !?' Red Dot Storage Facility Name of Storage Facility Name Street Name Name Name Name Name Name Name Nam		it or place other than your nome withi	n 1 year before you filed for bankruptcy?	
Who else has or had access to it? Red Dot Storage Facility Name of Storage Facility Name Number Street Number Street City State ZIP Code Ves State ZIP Code Ves State ZIP Code Ves State ZIP Code Ves Ves	_			
Red Dot Storage Facility Name of Storage Facility 1960 Wiesbrock Road Number Street Size E0543	Yes. Fill in the details.	Who also has at had access to \$2	Describe the contents	De veu e
Red Dot Storage Facility Name of Storage Facility Name Facility Na		who else has or had access to it?	Describe the contents	
Name of storage Facility 1960 Wiesbrock Road Number Street City State ZIP Code Oswego IL 60543 City State ZIP Code City State ZIP Code Oswers I I I formation Number Street Owers Name Number Street Number Street Where is the property? Describe the property Value Value Owers Name Number Street Number Stree			Misc. items, kids used items, bicycles, g	rill _
1960 Wiesbrock Road Number Street Number Street City State ZIP Code		_		
Number Street Number Street City State ZIP Code	Name of Storage Facility	Name		¥ Yes
Same State ZIP Code				
Identify Property You Hold or Control for Someone Else	Number Street	Number Street		
Identify Property You Hold or Control for Someone Else		City Ctate 7ID Code		
Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value Number Street Nu	Oswego IL 60543			
Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value Number Street Number Street Number Street City State ZIP Code Record of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of nazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Side means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Fort all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details.	City State ZIP Code			
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No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
			
	City State ZIP Co	de	
City State ZIP	Code		
ve you been a party in any judicia	al or administrative proceeding unde	r any environmental law? Include settlement	s and orders.
No			
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the case
Case title			
	Court Name		Pending
			On appea
	Number Street		☐ Conclude
Case number		7/D Codo	
Case number	City State 2	ZIP Code	
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r 1 Jose M	Manuel Esparza	Cas	e number (if known)
First Name	e Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·
		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Na	ame		Do not include Social Security number of Trins.
			EIN:
Number St	treet	Name of accountant or bookkeeper	Dates business existed
		Name of accountant of bookkeeper	Dates Dusiness existed
-			
City	State ZIP Code	_	From To
City	State ZIF Code	•	
Within 2 years	hefore you filed for bank	runtey did you give a financial statement to an	yone about your business? Include all financial
-	editors, or other parties.	ruptcy, did you give a financial statement to any	yone about your business? Include all financial
	cuitoro, or outlor particol		
☑ No □ Voo Fillini	the details below.		
Tes. Fill in	the details below.		
		Date issued	
Name		MM / DD / YYYY	
Number St	reet		
City	State ZIP Code	<u> </u>	
rt 12: Sign	Below		
I have read th	e answers on this Stater	ment of Financial Affairs and any attachments, a	and I declare under penalty of perjury that the
			property, or obtaining money or property by fraud
	1 with a bankruptcy case 152, 1341, 1519, and 3571	can result in fines up to \$250,000, or imprisonn .	nent for up to 20 years, or both.
00	, , , , , , , , , , , , , , , , , , , ,		
4 -		4	
s/Jose Ma	anuel Esparza	<u>s/Mayra Esparza</u>	
Signature o	of Debtor 1	Signature of Debtor 2	
Date 20 Ap	pril 2016	Date 20 April 2016	
Did you attac	h additional pages to Yo	ur Statement of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
_	, 5		,
☑ No			
☐ Yes			
Did you pay o	or agree to pay someone	who is not an attorney to help you fill out bankr	uptcy forms?
☑ No			
☐ Yes. Name	e of person		Attach the Bankruptcy Petition Preparer's Notice,
			Declaration, and Signature (Official Form 119).

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Fill in this in	formation to identify yo	our case:	
200.01	Jose Manuel Esparza First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Mayra Esparza First Name	Middle Name	Last Name
United States I	Bankruptcy Court for the: _	Norther	n District Of Illinois
Case number (If known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

or any creditors that you listed in Part 1 of Schedule D: Crentornation below.	ditors Who Hold Claims Secured by Property (Officia	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's name: CENLAR	☐ Surrender the property.	ĭ No
idino.	Retain the property and redeem it.	☐ Yes
Description of property securing debt: Principal Residence, 142 Lakeshore Drive,	Retain the property and enter into a Reaffirmation Agreement.	
Oswego IL 60543	Retain the property and [explain]: retain and pay	
Creditor's name: Chrysler Capital	☐ Surrender the property.	☑ No
· ·	Retain the property and redeem it.	☐ Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt: Dodge Ram 2014	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
Journing door.	Retain the property and [explain]:	

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Your name

Jose Manuel Esparza
First Name Middle Name

Last Name

Case number (If known)_

in the information below. Do not list r	use that you listed in Schedule G: Executory Contra real estate leases. Unexpired leases are leases that personal property lease if the trustee does not assu	are still in effect; the lease period has not yet
Describe your unexpired personal pro	perty leases	Will the lease be assumed?
Lessor's name:		☐ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
personal property that is subject to an	·	of my estate that secures a debt and any
Signature of Debtor 1	Signature of Debtor 2	
Signature of Debtor 1	Signature of Debtor 2	

Document

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Debtor 1

Jose Manuel	Esparza
First Name	Middle Name

Middle Name

Last Name

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Case number (if known)_

	Describe the nature of the business	Employer Identification number
Business Name	_	Do not include Social Security number or ITIN.
Dusilless Naille		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
	_	From To
City State ZIP Code	e	
		yone about your business? Include all financial
nstitutions, creditors, or other parties.		
☑ No ☑ Yes. Fill in the details below.		
	Date issued	
	Date issued	
Name	MM / DD / YYYY	
Number Street	_	
City State ZIP Cod	le e	
12: Sign Below		
I have read the answers on this State	ment of Financial Affairs and any attachments,	and I declare under penalty of perjury that the g property, or obtaining money or property by fraud
in connection with a bankruptcy case	e can result in fines up to \$250,000, or imprison	ment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 357	1.	
* JOH - DO	×	
Signature of Debtor 1	Signature of Debtor 2	
And when I	211-20-20	
Date 4ag	Date 04 40 00	
Did you attach additional pages to Yo	our Statement of Financial Affairs for Individuals	s Filing for Bankruptcy (Official Form 107)?
■ No		
Yes		
Did you nay or sares to nev someone	who is not an attorney to help you fill out bent	runtey forms?
No	e who is not an attorney to help you fill out bank	induction in state of the state
Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice,
		Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS

In	re Jose Manuel Esparza and Mayra Esparz	
		Case No
De	btor	Chapter 7
	DISCLOSURE OF COMPENSAT	TION OF ATTORNEY FOR DEBTOR
1.	named debtor(s) and that compensation paid to me	s rendered or to be rendered on behalf of the debtor(s) in
	For legal services, I have agreed to accept	\$ <u>1,700.00</u>
	Prior to the filing of this statement I have received	
	Balance Due	\$ <u>0.00</u>
2.	The source of the compensation paid to me was:	
	Debtor Other (specify)	
3.	The source of compensation to be paid to me is:	
	Debtor Other (specify)	
4.	X I have not agreed to share the above-discle members and associates of my law firm.	osed compensation with any other person unless they are
		compensation with a other person or persons who are not of the agreement, together with a list of the names of the d.
5.	In return for the above-disclosed fee, I have agreed case, including:	to render legal service for all aspects of the bankruptcy
	a. Analysis of the debtor's financial situation, an file a petition in bankruptcy;	d rendering advice to the debtor in determining whether to
	b. Preparation and filing of any petition, schedule	es, statements of affairs and plan which may be required;
	c. Representation of the debtor at the meeting of hearings thereof;	creditors and confirmation hearing, and any adjourned

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Fill in this in	formation to identify yo	our case:	
Debtor 1	Jose Manuel Esparza First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Mayra Esparza First Name	Middle Name	Last Name
United States	Bankruptcy Court for the: _	Northern Di	istrict Of Illinois
Case number (If known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Cre information below. 	editors Who Hold Claims Secured by Property (Officia	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: CENLAR Description of property securing debt: Principal Residence, 142 Lakeshore Drive, Oswego IL 60543	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☑ Retain the property and [explain]: retain and pay 	☑ No ☐ Yes
Creditor's name: Chrysler Capital Description of property securing debt: Dodge Ram 2014	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	ĭ No ☐ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes

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Your name

Jose Manuel Esparza
First Name Middle Name

Last Name

Case number (If known)_____

e your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		□ No
on of leased		☐ Yes
name:		☐ No
on of leased		☐ Yes
name:		☐ No
on of leased		☐ Yes
name:		□ No □ Yes
on of leased		u res
name:		□ No
on of leased		☐ Yes
name:		□ No
on of leased		☐ Yes
name:		□ No
on of leased		☐ Yes
Sign Below nalty of perjury, I declare that I have indice to an unexpired leads to an u	ease.	my estate that secures a debt and any
of Debtor 1	Signature of Debtor 2	
of Debtor 1	Signature of Debtor 2	

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- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

\$1700 flat fee includes legal services, fling fee, credit report & 2 classes through GreenPath BK

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

April 20, 2016

s//s/Stephanie K. Low

Date

Signature of Attorney

Serrano, Low & Hanson

Name of law firm

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
	administrative fee
	trustee surcharge
	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill in this information to identify your case:

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Debtor 1	Jose Manuel Esparza		
	First Name	Middle Name	Last Name
Debtor 2	Mayra Esparza		
(Spouse, if filing	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _		Northern	District Of Illinois
Case number			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.



Lidia E. Serrano Stephanie K. Low Marissa Hanson

431 Williamsburg Ave Geneva, IL 60134 630-844-8781 Stephanie@SLHlawfirm.com

CONTRACT FOR THE DELIVERY OF LEGAL SERVICES BANKRUPTCY FILING

Nature of Service: Chanter 7 Bankruptcy

By this agreement, JOSE ESPARZA AND MAYRA ESPARZA authorize Serrano, Low & Hanson, Attorneys at Law, to act as my legal representative in my chapter 7 bankruptcy to be filed in Kane County, Illinois. I hereby further state that:

- 1. I have furnished all the facts in the matter to the best of my knowledge and further agree to cooperate in providing my attorney with any and all information necessary for her to proceed with this matter. I authorize my attorney to withdraw from representing me should I fail to cooperate with her.
- 2. I understand that no promises have been made to me regarding the outcome of this matter.
- 3. I agree to pay to Serrano Low & Hanson a \$1,700 flat retainer for attorney fees. All funds must be paid in full prior to filing of the petition.

I understand that my attorney will perform the following legal work for the flat fee, and will only charge me additional fees under the terms and conditions of paragraph 4 and 5 of this agreement:

- A. Review my records and prepare my bankruptcy petition and schedules for filing; however, if a bankruptcy proceeding is not filed in my case after reviewing my records, my attorney will charge me her normal hourly rate as described in paragraphs 4 and 5 of this agreement for said review and return any remaining funds;
- B. File my bankruptcy petition and schedules:
- C. Represent me at the first meeting of creditors, confirmation hearing on my bankruptcy plan (if required), and at my reaffirmation hearing (if held and if required);
- D. Review all reaffirmation agreements prepared by creditors, and advise me as to such agreements;
- E. Handle inquires by my creditors relative to my case.

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1. Bankruptcy Court Filing Fee

\$335

2. Credit Report:

Individual filer

\$ 33.00 \$ 53.00

Joint filer

3. Pre-filing credit counseling Course if taken through GREENPATHBK.ORG \$ 25.00

4. Post filing personal financial course

if taken through GREENPATHBK.ORG individual filer joint filer

\$19.00 \$25 /

Anticipated total fees and costs for this matter:

FLAT FEE \$1700.00

- 4. I understand that my attorney will charge me additional fees for the following legal work, at her normal hourly charge of \$200.00 per hour:
 - A. Corrections and changes made to the bankruptcy petition, schedules and plan after filing caused by inadvertence or error on my part;
 - B. Preparation and negotiation of reaffirmation agreements with my creditors (there is no charge to review the agreement if the agreement is prepared by my creditor);
 - C. All motions and adversary proceedings filed by any of my creditors, the trustee or any other third party;
 - D. All motions and adversary proceedings that must be filed by my attorney for the administration of my case, such as motions to avoid certain liens;
 - E. Any meetings of creditors or meetings with the trustee held after or continued from the first meeting of creditors;
 - F. All other legal work performed by my attorney in connection with my case and not otherwise described in this agreement.
- 5. I understand that my attorney's hourly rate, if charged by my attorney as described in paragraph 4 above, will be charged to me as follows:
 - A. Attorney time includes, but is not limited to telephone calls to and from myself, telephone calls by my attorney to other attorneys or persons necessary to contact regarding my case, as my attorney deems necessary; preparation of letters, legal documents, legal research, review of letters and other documents related to my case, travel time and court time. I further understand that the following minimum standard charges will apply to my case:
 - (1) Minimum charge for each telephone call: .20 hour:
 - (2) Minimum charge for court appearance: 1.0 hour;
 - B. All costs and expenses incurred by my attorneys for this matter. I understand that my attorney will incur no costs in excess of \$25.00 without first consulting with me. I understand that my attorney will not advance any such costs on my

Case-161-1,3561 ag Decolad Vailed 04/20/16 as Einterted no 4/20/16 6td 9147207 rne Desc Main her request. Costs include, Document lim Rape, 70e of 070 wing expense items:

- (1) Filing fees, service of process fees and other court and administrative agency fees;
- (2) Photocopy, postage, delivery service fees and courier fees;
- (3) Court reporter fees, deposition fees and transcript fees;
- (4) Computer-aided legal research fees, computer data base access and connection charges;
- 7. I understand that my records will be reviewed and my petition and schedules will be prepared for my signature when my attorney is paid 1/2 of the retainer fee set forth above. I also understand that if I do not choose to proceed with my case after the petition and schedules are prepared, my attorney will be entitled to be reimbursed at her normal hourly rate for work performed. I understand that the remaining 1/2 of my retainer fee and filing fee must be paid before the petition and schedules are filed by my attorney with the court.
- 8. In the case of a chapter 13 filing, I understand and agree that in certain instances, my attorney will be compensated by me with payments from the trustee pursuant to court order under the terms of my reorganization plan.
- 9. I authorize my attorney to withdraw from representing me if I am more than 60 days delinquent in paying her fees I may owe.
- 10. I understand that in the event of my non-cooperation or material breach of this agreement (including the non-payment of any fees set forth above), the Attorney may withdraw from representation upon sending a letter via first class mail to the address provided by me, advising me of my attorney's intent to withdraw.
- 11. In the event that it is ever necessary for Attorney Stephanie K. Low to bring a collection action against me to collect any fees that I may owe to her, I agree that I will also pay to her reasonable attorneys fees for having to bring said collection action in addition to the fees that are the subject of the collection action.

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.